## UNITED STATES DISTRICT COURT

for the

Central District of California

LISETH AGUIRRE, on behalf of herself and others similarly situated,	) ) )						
Plaintiff(s)	)						
V.	Civil Action No. 5:25-cv-01161-JGB-SP						
MONARCH HEALTHCARE, A MEDICAL GROUP, INC.	) ) )						
Defendant(s)	) )						
SUMMONS IN A CIVIL ACTION							
To: (Defendant's name and address)  MONARCH HEALTHCARE C/O Its registered agent AI 330 N BRAND BLVD GLENDALE, CA	E, A MEDICAL GROUP, INC MANDA GARCIA						
A lawsuit has been filed against you.							
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:  James L. Davidson Greenwald Davidson Radbil PLLC 5550 Glades Road, Suite 550 Boca Raton, Florida 33431							
If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.							
	CLERK OF COURT						
Date:	Signature of Clerk or Deputy Clerk						

Civil Action No. 5:25-cv-01161-JGB-SP

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nar	me of individual and title, if ar	ny)					
was re	ceived by me on (date)		•					
	☐ I personally served the summons on the individual at (place)							
			on	; or				
	☐ I left the summons at the individual's residence or usual place of abode with (name)							
	on (date), a person of suitable age and discretion who resides there,  on (date), and mailed a copy to the individual's last known address; or							
	☐ I served the summo	, who is						
	designated by law to accept service of process on behalf of (name of organization)							
			on (date)		; or			
	☐ I returned the summons unexecuted because ☐ Other (specify):					; or		
	My fees are \$	for travel and S	<b>.</b>	for services, for a total of \$	0.00	·		
	I declare under penalty of perjury that this information is true.							
Date:								
		_						
		_						
		_		Server's address				

Additional information regarding attempted service, etc: